

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 39  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. James McCarthy**

Mailing Address 5555 Winghaven Blvd

City	State	Zip Code
O Fallon	MO	63368-3625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Senior Business Leader, Product Develo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-118-18-52**

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**B. Michael McEneney**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2333.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-73-18-52**

Amount of Each Receipt this Period

333.33

Full Name (Last, First, Middle Initial)

**C. Chris McWilton**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2912.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-106-18-52**

Amount of Each Receipt this Period

416.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

974.33

**TOTAL** This Period (last page this line number only)..... ►